

THE HIGH COURT OF KERALA

APPLICATION FOR ADVOCATE CODE

Enrollment Number * : _____

Name (As per Certificate) : Sri/Smt.

Address : _____

(Phone No.) : _____

Email : _____

Request for Issuance of New Code Modification of Existing Code

If modification, Details : _____

Date of Request : _____ Signature of Advocate : _____

FOR OFFICE USE

Name of Data Entry Person : _____

Signature of Section Officer : _____

Sl. No. _____ Code No. _____

* Copy of Enrollment Certificate to be attached.

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